

EP-SOP-5.1A
BROOKHAVEN NATIONAL LABORATORY
NOTIFICATION OF AN OPERATIONAL EMERGENCY

**TRANSMISSION OF THIS FORM SATISFIES THE REQUIREMENT OF THE
FIFTEEN MINUTE NOTIFICATION OF OPERATIONAL EMERGENCIES**

I. THIS IS A DRILL (CHECK ONE) YES ☐ NO ☐

IIA DATE OF EVENT _____ **IIB TIME OF EVENT CLASSIFICATION** _____

III. CLASSIFICATION OF EVENT (CHECK ONE)

OPERATIONAL EMERGENCY ☐

(Not otherwise classified)

ALERT ☐

SITE AREA EMERGENCY ☐

EMERGENCY TERMINATED ☐

RECOVERY ☐

IV. TYPE OF EVENT (CHECK ALL THAT APPLY)

RADIOLOGICAL SPILL ☐

TOXIC SPILL ☐

FIRE ☐

EXPLOSION ☐

SECURITY THREAT ☐

NATURAL PHENOMENON ☐

LOSS OF SITE POWER ☐

RELEASE TO ATMOSPHERE ☐

RELEASE TO WATER ☐

RELEASE TO GROUND ☐

OTHER (EXPLAIN) ☐

V. METEOROLOGY

WIND SPEED _____

WIND DIRECTION _____

**VI.a PROTECTIVE ACTIONS
TAKEN (on site)**

EVACUATE _____

SHELTER IN PLACE _____

**VI.b PROTECTIVE ACTIONS
RECOMMENDATIONS (off site)**

EVACUATE _____

SHELTER IN PLACE _____

VII DESCRIPTION OF THE EVENT (including building or facility involved).

VIII. CALL CHECKED BOX FOR ADDITIONAL INFORMATION OR VERIFICATION CALL

☐ FRANK MAROTTA (631) 872-9257

☐ BILL LEIGH-MANUELL (631) 872-9270

☐ _____

☐ JOHN SEARING (631) 872-9259

☐ COMMAND VEHICLE (631) 872-9251

ADDITIONAL INFORMATION WILL BE TRANSMITTED AS SOON AS AVAILABLE